State Farm Life Insurance Co. 2702 treland Grove Rd BLOOMINGTON IL 61709-0001 Telephone (309)763-1873

LIFE

POLICY NUMBER LF-1722-5380

Annual Notice of Policy Status

PLEASE PAY THIS AMOUNT

HORE

INSURED NICHAEL G VOGT

NICEAEL G VOGT 12039 NW CROOKED RD KANSAS CITY NO 64152-1469

POLICY DATE INFORMATION - Your policy is dated October 6, 1999. This notice provides information from October 6, 1999, to October 6, 2000.

PAYMENT INFORMATION - No amount is due. Your monthly payments of \$150.00 are made on the Fre-Authorized Payment Plan. Any payment received after October 5, 2000, is not reflected on this notice.

Continued planned payments of \$150.00 each month will provide coverage until Movember 5, 2005, based on guaranteed rates; and until July 5, 2013, based on current rates.

If no further payments are made, your policy will provide coverage until May 5, 2001, based on guaranteed rates; and until August 5, 2001, based on current rates.

A payment of at least \$697.49 will provide coverage until October 6, 2001.

INSURANCE INFORMATION

Insurance Amount

Universal Life

\$100,000.00

COST OF INSURANCE

Insurance Cost

Universal Life

\$1,055.95

ACCOUNT VALUE

Increase Decrease Balance -00

ACCOUNT VALUE
Beginning Balance
Payments
Interest Credited
Expense Charges
Cost of Insurance
Balance as of Sep. 30, 2000
Interest to Be Earned oct. 6, 2000
Total

1,055.95 11.06

2,302,72 2,313.78

INTEREST RATE - The account value currently earns 5.25* except the account value equal to any policy loan earns 6*. From January 5, 2000 to July 5, 2000, the current interest rate was 5.1*. From October 6, 1999 to January 5, 2000, the current interest rate was 6*. The interest rates are effective annual interest rates.

Thanks for letting us serve you . . .

All amounts shown are subject to verification. See reverse side for Important Information.

+x

Prepared OCT 5 2000

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

PLEASE RETURN THIS PART WITH YOUR CHECK MADE PAYABLE TO STATE FARM

MAUNED MICHARL G YOGT

POLICY NUMBER

PLEASE PAY THIS AMOUNT

Your sancelled check is your receipt. Any check, draft, or money order is received subject to collection

LF-1722-5380

State Farm Insurance Companies 2702 Ireland Grove Rd BLOOMINGTON IL 61709-0001

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ANNUAL CONTACT

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1005

EXHIBIT

Vogt, Michael G. v. SFLIC

VOGTM00000107PROD

Information continued for policy LF-1722-5380 Prepared October 5, 2000

SURREMDER VALUE - The surrender value as of October 6, 2000, will be \$777.78. The total account value has been reduced by the surrender charge of \$1,536.00 to determine the surrender value.

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: BEVERLY VOGT Successor: MICHAEL S VOGT, JENNIFER A BENEFIELD, WILLIAM PATRICK VOGT

IMPORTANT POLICYONNER MOTICE - Jou should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

ADDITIONAL INFORMATION — A new illustration for policy benefits and value will be provided upon request. There is currently no charge for this projection.

FINANCIAL TRANSACTIONS - Activity for Year Ending September 30, 2000

	Payments/	Expense	Cost of	Interest	Ending
Date	(Withdrawals)	Charges	Inaurance	Credited	Account Value
Date	(WITHGEAWAIR)	Charges	Insulance	Credited	MCCORNE ANIMA
D11					
Beginning	g Balance_				00
10061999	278.50	13.93	-	-	264.57
10061999	-	5.00	89.44	-	170.13
10191999	2,058.50	102.93	<u> </u>	_	2,125.70
11061999	2,030.00	5.00	87.76	6.05	2,030.99
	_	3.00			2,010.33
12061999	~	5.00	67.84	9.92	1,956.07
01052000	-	5.00	87.91	9.52	1,872.68
02052000	-	5.00	87.99	9.26	1,788.95
03062000	-	5.00	68.06	8.85	1,704.74
04052000	_	5.00	88.14	8.43	1,620.03
	255 00	, 3.00	90.17	0.43	1,020.00
04252000	255.00	12.75	-	-	1,862.28
04302000	150.00	7.50	_ -		2,004.78
05062000	-	5.00	87.87	8.53	1,920.44
05312000	150.00	7.50	~	_	2,062.94
06062000		5.00	67.82	9.51	1.979.73
05302000	150.00	7.50	002	3.32	2,122.23
		7.50	07 76	a_a,	4,144.43
07062000	_ -	5.00	87.76	9.91	2,039.38
D7312000	150.00	7.50	-	-	2,181.88
08062000	-	5.00	87.71	10.45	2,099.62
08312000	150.00	7.50			2,242.12
09062000	230.00	5.00	87.65	10.75	2,160.22
	1 = 0 00		07.05	10.12	
09302000	150.00	7.50	-	-	2,302.72

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT. IF THIS IS NOT CONVENENT, PLEASE COMPLETE THE FOLLOWING.							
Street or Rufa: Route	Residence Phone Humber						
City State/Province ZIP/Postal Code	Business Phone Number						
Township County Inside City Limits	Outside City Limits						
s charrige: Permanent Tempor'ary if temporary, how many months? Do y	ou plan to return to your previous andress? Yes						
Mailling address change only Location change (Please see your State Farm Agent)							
(Auto Policyholders Only) Is the vehicle driven to and from work/school?							
f the answer is "yes", what is the average weekly mileage for such use?	267-727 06-21-2007 (LO						

Vogt, Michael G. v. SFLIC

VOGTM00000108PROD

tale Farm Life Insurance Co. 702 Ireland Grove Rd LOOMINGTON IL 61709-0001 elephone (800)472-2384

LIFE

POLICY NUMBER LF-1722-5380

Annual Notice of Policy Status

PLEASE PAY THIS AMOUNT

NONE

INSURED NICHAEL G VOGT

NICHAEL G VOGT 12039 NW CROOKED RD KANSAS CITY NO 64152-1469

POLICY DATE INFORMATION - Your policy is dated October 6, 1999. This notice provides information from October 6, 2000, to October 6, 2001.

PAYMENT INFORMATION - so amount is due. Your monthly payments of \$150.00 are made on the Pre-Authorized Payment Plan. Any payment received after October 5, 2001, is not reflected on this sotice.

Continued planned payments of \$150.00 each month will provide coverage until January 5, 2007, based on guaranteed rates; and until June 5, 2013, based on current rates.

If no further payments are made, your policy will provide coverage until September 4, 2002, based on guaranteed rates; and until March 7, 2003, based on current rates.

A payment of at least \$134.41 will provide coverage until October 6, 2002.

INSURANCE INFORMATION

Insurance Amount

Universal Life

\$100,000-00

COST OF INSURANCE

Insurance Cost

Universal Life

\$1,145.23

ACCOUNT VALUE
Balance from 2000 Annual Notice
Payments
Interest Credited
Expense Charges
Cost of Insurance
Balance as of Sep. 30, 2001
Interest to Be Earned Oct. 6, 2001
Total Increase

Balance 2.313.78 150.00

2,956.10 2,969.91

INTEREST RATE - The account value currently earns 6% except the account value equal to any policy loam earns 6%. From October 6, 2000 to May 5, 2001, the current interest rate was 6.25%. The interest rates are effective annual interest rates.

SURRENDER VALUE \sim The surrender value as of October 5, 2001, will be \$1,433.91. The total account value has been reduced by the surrender charge of \$1,536.00 to determine the surrender value.

Thanks for letting us serve you . . .

All amounts shown are subject to verification. See reverse side for important information.

47

Decrease

Prepared OCT 5 2001

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

PLEASE RETURN THIS PART WITH YOUR CHECK MADE PAYABLE TO STATE FARM

INSURED MICHAEL G VOGT

POLICY NUMBER

PLEASE PAY THIS AMOUNT

Your cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

LF-1722-5380

State Farm Insurance Companies 2702 Ireland Grove Rd BLOOMINGTON IL 61709-0001

Lillian Hardland Indiana Hardlan Hardlan

ANNUAL CONTACT

LIFE

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NONE

Vogt, Michael G. v. SFLIC

VOGTM00000101PROD

Information continued for policy LF-1722-5380 Prepared October 5, 2001

BENEFICIARY INFORMATION — The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: BEVERLY VOGT Successor: MICHAEL S VOGT, JENNIFER A BENEFIELD, WILLIAM PATRICK VOGT

IMPORTANT POLICYONNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

ADDITIONAL INFORMATION - A new illustration for policy benefits and value will be provided upon request. There is currently no charge for this projection.

FINANCIAL TRANSACTIONS - Activity for Year Ending September 30, 2001

Date	Payments/ (withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance	from 2000 Annual	Notice			2,313.78
10062000	-	5.00	95.73	-	2,213.05
10312000	150.00	7.50	-	-	2,355.55
11062000	-	5.00	95.68	11.33	2,266.20
11302000	150.00	7.50	-	-	2,408.70
12062000	-	5.00	95.62	11.60	2,319.68
12312000	150.00	7.50	-		2,462.18
01062001	_ `	5.00	95.57	11.87	2,373.48
01312001	150.00	7.50	-	**	2,515.98
02062001	•	5.00	95.52	12.14	2,427.60
02262001	150.00	7.50	_	•	2,570.10
03062001		5.00	95.46	12.42	2,482.06
03312001	150.00	7.50	-	-	2,624.56
04062001	-	5.00	95,41	12.69	2,536.84
04302001	150.00	7.50	-	••	2,679.34
05062001	-	5.00	95.36	12.97	2,591.95
05312001	150.00	7.50	•	-	2,734.45
06062001	•	5.00	95.30	12.73	2,546.88
06302001	150.00	7.50	-	-	2,789.38
07062001	_	5.00	95.25	13.00	2,702.13
07312001	150.00	7.50	-	_	2.844.63
08052001		5.00	95.19	13.26	2,757.70
08312001	150.00	7.50	•		2,900.20
09062001		5.00	95.14	13.54	2,813.60
09302001	150.00	7.50			2,956.10

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT. IF THIS IS NOT CONVENIENT, PLEASE COMPLETE THE FOLLOWING.						
Treet of Hurst Route				Residence Phone Number		
ity	State/Province	ZIP/Portal Code	_	Business Phone Humber		
ownehip County		Inside City Limits		Outside City Limits		
change: Permanent Temporary	If temporary, how mar	ny months? Do	you p	plan to return to your previous address?	Yes 🗀	
Mailing address change only Loca	tion change (Please s	ee your State Farm Agent;)			
Auto Policyholdera Only)						
s the rehicle driven to and from work/school? I the answer is "yes", what is the average week		rgu 7				
	,			297-727 1 06-31-3	007 6.06	

Vogt, Michael G. v. SFLIC

VOGTM00000102PROD

State Farm Life Insurance Co. 2702 Ireland Grove Rd BLOOMINGTON IL 61709-0001 Telephone (309)763-1835

LIFE

POLICY NUMBER

LF-1722-5380

Annual Notice of Policy Status

PLEASE PAY THIS AMOUNT

NONE

INSURED NICHAEL G VOGT

MICHAEL G VOGT 12039 NW CROOKED RD KANSAS CITY MO 64152-1469

المرائية الرابية البارية الإسارات الطوران المرايية

POLICY DATE INFORMATION - Your policy is dated October 6, 1999. This notice provides information from October 6, 2001, to October 6, 2002.

PAYMENT INFORMATION - No amount is due. Your monthly payments of \$150.00 are made on the Pre-Authorized Payment Plan. Any payment received after October 5, 2002, is not reflected on this notice.

Continued planned payments of \$150.00 each month will provide coverage until November 5, 2007, based on guaranteed rates; and until December 5, 2014, based on current rates.

If no further payments are made, your policy will provide coverage until February 4, 2004, based on guaranteed rates; and until November 5, 2004, based on current rates.

INSURANCE INFORMATION

Insurance Amount

Universal Life

\$100,000.00

COST OF INSURANCE

Insurance Cost

Universal Life

5002

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*

\$1,180.91

Increase Decrease

ACCOUNT VALUE
Balance from 20D1 Annual Notice
Payments
Interest Cradited 162.23
Expense Charges
Cost of Insurance
Balance as of Sep. 30, 2002
Interest to Be Earned Oct. 6, 2002
15.57

150.00

3,601.23 3,616.80

INTEREST RATE - The account value currently earns 5.5% except the account value equal to any policy loan earns 6%. From November 6, 2001 to September 5, 2002, the current interest rate was 5.75%. From October 6, 2001 to November 5, 2001, the current interest rate was 6%. The interest rates are effective annual interest rates.

SURRENDER VALUE - The surrender value as of October 6, 2002, will be \$2,272.80. The total account value has been reduced by the surrender charge of \$1,344.00 to determine the surrender value.

Thanks for letting us serve you . . .

All amounts shown are subject to verification, See reverse side for important information.

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Prepared OCT 5 2002

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

PLEASE RETURN THIS PART WITH YOUR CHECK MADE PAYABLE TO STATE FARM

INSURED MICHAEL G VOGT LF-1722-5380

POLICY MIRABER

PLEASE PAY THIS AMOUNT

NONE

Your cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

State Parm Insurance Companies 2702 Ireland Grove Rd BLOOKINGTON IL 61709-0001

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ANNUAL CONTACT

LIFE

1005

Vogt, Michael G. v. SFLIC

VOGTM00000113PROD

Information continued for policy LP-1722-5380 Prepared October 5, 2002

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: BEVERLY VOGT Successor: MICHAEL 5 VOGT, JENNIFER A BENEFIELD, WILLIAM PATRICK VOGT

IMPORTANT POLICYOWNER NOTICE - you should consider requesting more detailed information about your policy to understand now it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

ADDITIONAL INFORMATION — A new illustration for policy benefits and value will be provided upon request. There is currently no charge for this projection.

FINANCIAL TRANSACTIONS - Activity for Year Ending September 30, 2002

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance 10062001 103162001 113062001 113062001 123182001 01062002 0120622002 02082002 03312002 04302002	(Withdrawals)	Charges selected to the control of t	104.28 104.23 104.18 96.69 96.64 96.58	14.04 13.69 13.91 14.16 14.43	2,969,91 2,860,63 3,003,94 3,050,44 3,050,45 3,097,45 3,097,45 3,097,45 3,152,17 3,152,19 3,120,09 3,120,54 3,175,69
05062002 05312002 05062002 07062002 07312002 08062002 08312002 09062002 09302002	150.00 150.00 150.00 150.00	575	96.47 96.41 96.36 96.30 96.24	14.94 15.20 15.46 15.73	3,231.66 3,374.16 3,287.95 3,430.45 3,487.05 3,487.04 3,543.98 3,543.98 3,660.23

IF YOU HAVE MOVED, PLEASE CONTA	ACT YOUR AGENT, IF	THIS IS NOT CO	VEN	ENT, PLEASE COMPLETE THE FOLLOWS
treel or Rutal Route			—	Residence Phone Number
ownship County	State/Province	21P/Postal Code Inside City Limits		Business Phone Number Outside City Limits
s change: Permaneni Temporary Mailing address change only Loca	If temperary, how many mo			plan to return to your previous address?
Auto Policyholders Only) s the vehicle diwen to and from work/school? I the answer is "yes", what is the average weel				
				291-727 F DS-31-2007 (L

Vogt, Michael G. v. SFLIC

VOGTM00000114PROD

LIFE

State Farm Life Insurance Co. 2702 ireland Grove Rd BLOOMINGTON IL 61709-0001 Telephone (309)763-1271

POLICY NUMBER LF-1722-5980

Annual Notice of Policy Status

PLEASE PAY THIS AMOUNT

HONE

INSURED RICHAEL G VOGT

NICHAEL G VOGT 12039 NW CROOKED RD KANSAS CITY NO 64152-1469

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POLICY DATE INFORMATION - Your policy is dated October 6, 1999. This notice provides information from October 6, 2002, to October 6, 2003.

PAYMENT INFORMATION - No amount is due. Your monthly payments of \$150,00 are made on the Pre-Authorized Payment Plan. Any payment received after October 4, 2003, is not reflected on this notice.

Continued planned payments of \$150.00 each month will provide coverage until September 4, 2008, based on guaranteed rates; and until November 5, 2014, based on current rates.

If no further payments are made, your policy will provide coverage until May 5, 2005, based on guaranteed rates; and until May 5, 2005, based on current rates.

INSURANCE INFORMATION

Insurance Amount \$100,000.00

Universal Life

Insurance Cost

COST OF INSURANCE Universal Life

Š

\$1.250.54

Increase

Balance 3,615.80

ACCOUNT VALUE
Balance from 2002 Annual Notice
Payments 1,800.00
Interest Credited 178.92
Expense Charges
Cost of Insurance
Balance as of Sep. 30, 2003
Interest to 8e Earned Oct. 6, 2003
Total 150.00

4,195.18 4,212.60

INTEREST RATE - The account value currently earns 5.25% except the account value equal to any policy loam earns 6%. From October 6, 2002 to December 5, 2002, the current interest rate was 5.5%. The interest rates are effective annual interest rates.

SURRENDER VALUE - The surrender value as of October 6, 2003, will be 53,060.60. The total account value has been reduced by the surrender charge of \$1,152.00 to determine the surrender value.

Thanks for letting us serve you . . .

All amounts shown are subject to verification. See reverse side for important information.

4-2

Decrease

Prepared OCT 4 2003

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT.

INSURED MICHAEL G VOGT

POLICY NUMBER LF-1722-5380 PLEASE RETURN THIS PART WITH YOUR CHECK MADE PAYABLE TO STATE FARM

PLEASE PAY THIS AMOUNT

NONE

Your cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

State Farm Insurance Companies 2702 Ireland Grove Rd BLOOMINGTON JL 51709-0001

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ANNUAL CONTACT

LIFE

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Information continued for policy LF-1722-5380 Prepared October 4, 2003

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: BEVERLY VOGT Successor: MICHAEL S VOGT, JENNIFER A BENEFIELD, WILLIAM PATRICK VOGT

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

ADDITIONAL INFORMATION — A new illustration for policy benefits and value will be provided upon request. There is currently no charge for this projection.

FINANCIAL TRANSACTIONS - Activity for Year Ending September 30, 2003

Expense Charges	Cost of Insurance	interest Credited	Ending Account Value
Charges Notice 7.500 7.500 7.500 7.500 7.500 7.500 7.500 7.500 7.500 7.500 7.500 7.500 7.500	104.51 104.45 104.40 104.35 104.29 104.24 104.19	15.79 16.01 15.50 15.71 15.93 16.13	
7.50 5.00 7.50 5.00 7.50 7.50	104.02 103.97 103.91	15.77 16.98 17.20	4.043.53 3.951.38 4.091.89 4.144.39 4.052.68
	Charges Notice 7.000 7.000 7.000 7.500 7.500 7.500 7.500 7.500 7.500 7.500 7.500 7.500 7.500 7.500	Charges Insurance Notice 5.00 104.51 7.50 104.45 7.50 104.45 7.50 104.35 7.50 104.29 7.50 104.24 7.50 104.19 7.50 104.08 7.50 104.08 7.50 104.08 7.50 104.08 7.50 104.08 7.50 104.08 7.50 104.08 7.50 104.08 7.50 104.08 7.50 104.08	Charges Insurance Credited Notice 5.00 104.51 - 7.50 5.00 104.45 15.79 7.50 5.00 104.40 16.01 7.50 7.50 7.50 7.50 104.29 15.71 7.50 104.29 15.71 7.50 104.19 16.13 7.50 5.00 104.19 16.13 7.50 5.00 104.19 16.35 7.50 5.00 104.19 16.35 7.50 5.00 104.19 16.35 7.50 104.00 16.55 7.50 104.00 16.55 7.50 104.00 16.55 7.50 104.00 16.55 7.50 104.00 16.90 7.50 103.97 16.90

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT. IF THIS IS NOT CONVENENT, PLEASE COMPLETE THE FOLLOWING.						
Street or Rural Route	MANAGEMENT CONTROL OF THE STATE	**************************************	Residence Phone Number			
City	State/Province	ZIP/Postal Code	Business Phone Number Outside City Limits			
S change: Parmanent	County Temporary of temporary, how many	months? Do votal	plan to return to your previous address? 2 Yes	_		
_	Location change (Piesse see		painto retain to your provider and the retain			
Auto Policyholders Only) is the vehicle driven to and from v	pris/school? Yes No					
	iverage weekly mileage for such use	?	267,323 1 66 31 2003 ((LD4		

POLICY NUMBER PLEASE PAY THIS AMOUNT Annual Notice of Policy Status NONE LF-1722-5380 INSURED KICHAEL G VOGT 0000001 KICHAEL G VOGT 12039 NW CROOKED RD KANSAS CITY KO 64152-1469 hilm behald and bediefed block and block ball and POLICY DATE INFORMATION - Your policy is dated October 6, 1999. This notice provides information from October 6, 2003, to October 6, 2004. PATHENT INFORMATION - No amount is due. Your monthly payments of \$150.00 are made on the Pre-Authorized Payment Plan. Any payment received after October 5, 2004, is not reflected on this notice. Continued planned payments of \$150.00 each month will provide coverage until June 5, 2009, based on guaranteed rates; and until October 5, 2014, based on current rates. If no further payments are made, your policy will provide coverage until July 5, 2006, based on guaranteed rates; and until August 5, 2007, based on current rates. INSURANCE INFORMATION Insurance Amount Universal Life \$100,000.00 COST OF INSURANCE Insurance Cost Universal Life \$1.348.01 ACCOUNT VALUE
Balance from 2003 Annual Notice
Payments
Interest Credited
Expense Charges
Cost of Insurance
Balance as of Sep. 30, 2004
Interest to Be Barned Oct. 6, 2004
Total Decrease Balance 4,212.60 150.00 4.710.36 INTEREST RATE - The account value currently earns 5% except the account value equal to any policy loan earns 5%. From October 6, 2003 to December 5, 2003, the current interest rate was 5.25%. The interest rates are effective annual interest rates. SURRENDER VALUE - The surrender value as of October 6, 2004, will be \$3,769.07. The total account value has been reduced by the surrender charge of \$950.00 to determine the surrender value. All amounts shown are subject to verification. See reverse side for important information. Thanks for letting us serve you . . . 42

Prepared OCT 5 2004

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

INSURED RICHAEL G VOGT

POLICY NUMBER

LF-1722-5380

PLEASE RETURN THIS PART WITH YOUR CHECK MADE PAYABLE TO STATE FARM

PLEASE PAY THIS AMOUNT

MONE

Your cancelles check is your receipt. Any check, draft, or money order is received exigect to collection.

State Farm Insurance Companies 6900 Amberglen Blvd AUSTIN TX 76729-1110

HarlishbachdidaanHarlishbanlatt

ANNUAL CONTACT

LIFE

1005

Information continued for policy LF-1722-5380 Prepared October 5, 2004

 $\begin{array}{ll} \textbf{BENEFICIARY INFORMATION - } & \textbf{The beneficiary designation is an important part of your policy. Your beneficiary designation is: \\ \\ \end{array}$

Primary: BEVERLY VOGT SUCCESSOT: MICHAEL S VOGT, JENNIFER A BENEFIELD, WILLIAM PATRICK VOGT

IMPORTANT POLICIONNER MOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

ADDITIONAL INFORMATION - a new illustration for policy benefits and value will be provided upon request. There is currently no charge for this projection.

FINANCIAL TRANSACTIONS - Activity for Year Ending September 30, 2004

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance	from 2003 Annual	Notice			4,212.60
10062003		5.00	112.61	-	4.094.99
10312003		7.50	-	-	4,237.49
11062003		5.00	112.56	17.60	4.137.53
11302003		7.50	-	-	4.280.03
12062003		5.00	112.51	17.78	4,180.30
12312003		7.50	-	-	4,322.80
01062004	•	5.00	112.46	17.12	4,222.46
01312004	150.00	7.50	-	-	4,364.96
02062004		5.00	112.41	17.30	4,264.85
02292004	150.00	7.50	-	-	4.407.35
03052004	_	5.00	112.36	17.48	4.307.47
03312004	150.00	7.50	~	-	4,449.97
04062004	_	5.00	112.31	17.64	4,350.30
04302004	150.00	7.50	-	-	4,492.80
05062004	-	5.00	112.26	17.82	4,393.36
05312004	150.00	7.50	-	-	4,535.86
06062004	-	5.00	112.21	17.99	4,436.64
06302004	150.00	7.50	-	-	4,579.14
07062004	-	5.00	112.16	18.17	4,480.15
07312004	150.00	7 - 50	-	-	4,622.65
08062004		5.00	112.11	18.35	4,523.89
08312004	150.00	7.50	-	-	4,666.39
09062004	-	5.00	112.05	18.52	4,567.85
09302004	150.00	7.50	-	-	4,710.36

F YOU HAVE MOVED, PLE	ASE CONTAC	T YOUR AGENT. II	THIS IS NOT CON	VEN	IENT, PLEASE COMPLETE THE POLLO	WING
Street of Rural Route					Residence Phone Humber	
City		Siste/Province	ZIP/Postal Code	_	Bueness Phone Humber Outside City Limits	
Township	County		,	_		
ls change: Permanent] Temporary (f temporary, how many (months? De	you !	plan to return to your previous address? 🔲 Yes	• 🗆
Mailing siddress change only	Locatio	on change (Please see	your State Farm Agen	1)		
(Auto Policyholders Only) Is the vehicle driven to and from t If the answer is "yes", what is the			7		_	

NONE

POLICY NUMBER PLEASE PAY THIS AMOUNT **Annual Notice of Policy Status** LF-1722-5380 1000001 INSURED MICHAEL G VOGT MICHABL G VOGT 12039 NW CROCKED RD KANSAS CITY NO 64152-1469 todabidoobbibbbbbbbbbbbbbbbb POLICY DATE INFORMATION - Your policy is dated October 6, 1999. This notice provides information from October 6, 2004, to October 6, 2005. PATHENT INFORMATION - No amount is due. Your monthly payments of \$150.00 are made on the Pre-Authorized Payment Plan. Any payment received after October 5, 2005, is not reflected on this hotice. Continued planned payments of \$150.00 each month will provide coverage until February 4, 2010, based on guaranteed rates; and until September 4, 2014, based on current rates. If no further payments are made, your policy will provide coverage until September 4, 2007, based on guaranteed rates; and until September 4, 2008, based on current rates. INSURANCE INFORMATION Insurance Amount Universal Life \$100,000.00 COST OF INSURANCE Insurance Cost Universal Life \$1,461.90 ACCOUNT VALUE
Balance from 2004 Annual Notice
Payments
Interest Credited
Expense Charges
Cost of Insurance
Balance as of Sep. 30, 2005
Interest to Be Earned Oct. 6, 2005
Total Increase Decrease 150.00 19.39

INTEREST RATE - The account value currently earns 4.75% except the account value equal to any policy loan earns 6%. From October 6, 2004 to December 5, 2004, the current interest rate was 5%. The interest rates are effective annual interest rates.

SURREMDER VALUE — The surrender value as of October 6, 2005, will be \$4,374.87. The total account value has been reduced by the surrender charge of \$768.00 to determine the surrender value.

Thanks for letting us serve you . . .

(Page 1 of 2) All amounts shown are subject to verification. See reverse side for important information.

43

Prepared OCT 5 2005

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

PLEASE RETURN THIS PART WITH YOUR CHECK MADE PAYABLE TO STATE FARM

MEURED MICHAEL G VOGT

PLEASE PAY THIS AMOUNT

LP-1722-5380

HONE

Balance 4,729.07

5.123.48

5,142.87

Your cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

State Farm Insurance Companies 8900 Amberglen Blvd AUSTIN TX 78729-1110

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ANNUAL CONTACT

LIFE

1005

Information continued for policy LF-1722-5380 Prepared October 5, 2005

BENEFICIARY IMPORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: Beverly vogt Successor: Michael S vogt, Jennifer A Benefield, William Fatrick vogt

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. Fou should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. Fou may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

ADDITIONAL INFORMATION - A new illustration for policy benefits and value will be provided upon request. There is currently no charge for this projection.

FINANCIAL TRANSACTIONS - Activity for Year Ending September 30, 2005

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance f	rom 2004 Annual	Notice			4,729.07
10062004	-	5.00	122.07	-	4,602.00
10312004	150.00	7.50	-		4,744.50
11062004	-	5.00	122.02	18.84	4,636.32
11302004	150.00	7.50	-	-	4,778.82
12062004	•	5.00	121.98	10.99	4,670.83
12312004	150.00	7.50	-	-	4,813.33
01062005	.	5.00	121.93	18.19	4,704.59
01312005	150.00	7.50	-	-	4,847.09
02062005		5.00	121.89	18.32	4,738.52
02282005	150.00	7 - 50			4,881.02
03062005		5.00	121.85	18.46	4,772.63
03312005	150.00	7.50		10-50	4,915.13
04062005	- 	5.00	121.80	18.58	4,806.91
04302005	150.00	7 - 50	101-16	10 77	4,949.41
05062005	150 00	5.00	121.76	18.72	4,841.37
05312005	150.00	7.50	303 700	18.85	4,983.87
06062005	150 00	5.00	121.72	10.02	4.876.00
06 302005	150.00	7 - 50	121.67	18.99	5,018.50
07062005	150 00	5.00	121.67	18.99	4,910.82
07312005	150.00	7-50	121.63	19.12	5,053.32
08062005	150.00	5.00 7.50	121.63	19.12	4,945.81 5,088.31
08312005		5.00	121.58	19.25	4,980.98
09062005 09302005	150.00	7.50	121.50	- 25	5,123.48

(Page 2 of 2)

IF YOU HAVE MOVED, PLEASE CONTAIN	CT YOUR AGENT. IF T	HIS IS NOT CONVEN	ENT, PLEASE COMPLETE THE FOLLOWING.
Street or Rural Route			Residence Phone Humber
City Township County	State/Province	ZIP/Poetal Code	Business Phone Humber Outside City Limits
Is change; Permanent Temporary	If temporary, how many mon	nthe? Do you	plan to return to your previous address? 🗀 Yes 🔲 No
Mailing address change only	on change (Please see yo	ur State Farm Agent)	
(Auto Policyholders Only) Is the vehicle driven to and from work/school? If the answer is "yes", what is the average week!			-

State Farm Life Insurance Co. 8900 Ambergion Blvd AUSTIN TX 78729-1110 Telephone (512)918-6704

POLICY NUMBER LF-1722-5380 E000001

Annual Notice of Policy Status

PLEASE PAY THIS AMOUNT

NONE

MICHAEL G VOGT 12039 NW CROOKED RD KANSAS CITY NO 54152-1469

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POLICY DATE INFORMATION - Your policy is dated October 5, 1999. This notice provides information from October 6, 2005, to October 6, 2006.

PAYMENT INFORMATION - No amount is due. Your monthly payments of \$150.00 are made on the Pre-Authorized Payment Plan. Any payment received after October 5, 2006, is not reflected on this notice.

Continued planned payments of \$150.00 each month will provide coverage until September 4, 2010, based on guaranteed rates; and until August 5, 2014, based on current rates.

If no further payments are made, your policy will provide coverage until September 4, 2008, based on guaranteed rates; and until September 4, 2009, based on current rates.

INSURANCE INFORMATION

Insurance Amount

INSURED MICHAEL G VOGT

\$100.000.00

COST OF INSURANCE

Insurance Cost

Universal Life

2

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Universal Life

\$1,593.36

ACCOUNT VALUE

Balance from 2005 Annual Notice
Payments
Interest Credited 210.07

Expense Charges
Cost of Insurance
Balance as cf Sep. 30, 2005
Interest to Be Earned Oct. 6, 2006
Total Increase Decrease 150.00

5,409.58 5,429.02

INTEREST RATE - The account value currently earns 4.5% except the account value equal to any policy loan earns 6%. From October 6, 2005 to December 5, 2005, the current interest rate was 4.75%. The interest rates are effective annual interest rates.

SURRENDER VALUE - The surrender value as of October 6, 2006, will be \$4,853.02. The total account value has been reduced by the surrender charge of \$576.00 to determine the surrender value. SURRENDER VALUE -

Thanks for letting us serve you . . .

(Page 1 of 2) All amounts shown are subject to verification. See reverse side for important information,

4-x

Prepared OCT 5 2006

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT.

PLEASE RETURN THIS PART WITH YOUR CHECK MADE PAYABLE TO STATE FARM

MICHAEL G VOGT

PLEASE PAY THIS AMOUNT

LF-1722-5380

NONE

ur cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

State Farm Insurance Companies 8900 Ambergien Blvd AUSTIN TX 78729-1110

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ANNUAL CONTACT

LIFE

1005

Information continued for policy LF-1722-5380 Prepared October 5, 2006

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: BEVERLY VOGT Successor: MICHAEL S VOGT, JENNIFER A BENEFIELD, WILLIAM PATRICK VOGT

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

ADDITIONAL INFORMATION - A new illustration for policy benefits and value will be provided upon request. There is currently no charge for this projection.

FINANCIAL TRANSACTIONS - Activity for Year Ending September 30, 2006

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance 10062005 10312005 11062005	from 2005 Annual 150.00	Notice 5.00 7.50 5.00	132.96	- 19.48	5,142.87 5,004.91 5,147.41 5,028.96
11302005 12062005 12312005	150.00 150.00	7.50 5.00 7.50	132.90	19.58	5,171.46 5,053.14 5,195.64
01062006 01312006 02062006 02282006	150.00 150.00	5.00 7.50 5.00 7.50	132.83	18.74	5,076.43 5,218.93 5,099.84 5,242.34
03062006 03312008 04062006 04302005	150.00	5.00 7.50 5.00 7.50	132.90	18.83	5,123.37 5,265.87 5,147.02 5,289.52
05052005 05312006 05062005 06302006	150.00	5.00 7.50 5.00 7.50	132.73	19.00	5,170.79 5,313.29 5,194.68 5,337.18
07062005 07312006 08062006 08312006	150.00	5.00 7.50 5.00 7.50	132.66	19.18	5,218.70 5,361.20 5,242.03 5,305.33
09062006	150.00	5.00 7.50	132.60	19.35	5,267.08 5,409.58

(Page 2 of 2)

IF YOU HAVE MOVED, PLEASE CONT	FACT YOUR AGENT, IF	THIS IS NOT CON	VEN	ENT, PLEASE COMPLETE THE FOLLO	WING.
real of Rural Route			•••••	Residence Phone Number	
Y	Stale/Province	ZIP/Portal Code Inside City Limits		Business Phone Number Outside City Limits	
whethip County change: Permaneni Temporery	If temporary how many m	onths? Do	you p	plan to return to your preyious address? Yes	. 🗆
Neiling eddress thange only Loc)		
uid Policyholders Only): the vehicle dilwen to and from work/school the answer is "yes", what is the average we				_	

POLICY NUMBER LP-1722-5380 E000001 NICHAEL G VOGT 12039 NW CROOKED RD KANSAS CITY NO 64152-1469

Annual Notice of Policy Status

PLEASE PAY THIS AMOUNT NONE

INSURED MICHAEL G VOGT

POLICY DATE INFORMATION - Your policy is dated October 6, 1999. This notice provides information from October 6, 2006, to October 6, 2007.

PAYMENT INFORMATION - No amount is due. Your monthly payments of \$150.00 are made on the State Farm Payment Plan. Any payment received after October 5, 2007, is not reflected on this notice. Continued planned payments of \$150.00 each month will provide coverage until March 7, 2011, based on guaranteed rates; and until August 5, 2014, based on current rates.

If no further payments are made, your policy will provide coverage until August 5, 2009, based on guaranteed rates; and until July 5, 2010, based on current rates.

INSURANCE INFORMATION

Insurance Amount

Universal Life

\$100,000.00

COST OF INSURANCE

Insurance Cost

Universal Life

\$1,749.39

ACCOUNT VALUE
Balance from 2006 Annual Notice
Payments
Interest Credited
Expense Charges
Cost of Insurance
Balance as of Oct. 2, 2007 Increase Decrease 150.00

Balance 5,429.02

5.546.02

Balance as of Oct. 2, 2007 Interest to Be Barned Oct. 6, 2007 Total 19.91 5.565.93

INTEREST RATE - The account value currently earns 4.54 except the account value equal to any policy loan earns 6%. The interest rates are effective annual interest rates.

SURRENDER VALUE - The surrender value as of October 6, 2007, will be \$5,181.93. The total account value has been reduced by the surrender charge of \$384.00 to determine the surrender value.

Thanks for letting us serve you . . .

(Page 1 of 2) All amounts shown are subject to verification. See roverse side for important information.

Propered OCT 5 2007
State Farm Life insurance Co (Not Licensed in MA, NY, or Will State Farm Life and Accident Assurance Co (Licensed in NY and Will)

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT.

PLEASE RETURN THIS PART WITH YOUR CHECK MADE PAYABLE TO STATE FARM

MEURED RICHAEL G VOGT

PLEASE PAY THIS AMOUNT

POLICY NUMBER

LF-1722-5380

Your cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

State Farm Insurance Companies 8900 Ambergien Blvd AUSTIN TX 76729-1110

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ANNUAL CONTACT

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Information continued for policy LF-1722-5380 Prepared October 5, 2007

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: BEVERLY VOGT Successor: MICHAEL 8 VOGT, JENNIFER A BENEFIELD, WILLIAM PATRICK VOGT

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling state Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

ADDITIONAL INFORMATION - A new illustration for policy benefits and value will be provided upon request. There is currently no charge for this projection.

FINANCIAL TRANSACTIONS - Activity for Year Ending October 2, 2007

Pay Date (With	ments/ drawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending account Value
Bate (With Balance from 2 10062006 1 11052006 1 12052007 0 103052007 1 03052007 1 04052007 1 050520007 1 050520007 1 0505200000000000000000000000000000000	ments/drawale) 00.6 Annual 50.00 50.00 50.00 50.00 50.00 50.00 50.00 50.00	Charges Notice 57.000 57.000 57.000 57.500 77.500 77.500 77.500 77.500	145.86 145.84 145.83 145.81 145.79 145.77 145.76	19.48 19.52 19.56 19.60 19.65 19.69	9alue 5,429.02 5,429.166 5,429.30 5,429.30 5,431.30 5,431.30 5,314.24 5,314.25 5,314.25 5,314.35
07062007 08052007 08072007 109042007 109062007	50.00 50.00 50.00	5.00 7.50 5.00 7.50 7.50 7.50 7.50	145.70 145.70 145.67	19.77 19.82 19.77 -	5,368.90 5,511.40 5,380.52 5,249.39 5,391.89 5,534.39 5,403.52 5,546.02

(Page 2 of 2)
When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transpotion. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT. IF THIS IS NOT CONVENIENT, PLEASE COMPLETE THE FOLLOWING.								
Street or Rural Royte			Presidence Phone Number					
City	State/Province	ZiP/Postal Code	Business Phone Number Outside City Limits					
Township Cour	•	a mosthaft Down	ou plan to return to your previous addreses?					
Mailing address change only	_							
(Auto Policyholders Only) Is the vehicle driven to and from work/ If the answer is "yes", what is the aven		107	_					
			297-727.1 06-31-2007 (L050					

State Farm Life Insurance Co. 8500 Ambergien Blvd AUSTIN TX 78729-1110 Telephone (970)395-4094

POLICY NUMBER

Annual Notice of Policy Status

PLEASE PAY THIS AMOUNT

E000001

INSURED MICHAEL G VOGT

NICHAEL G VOGT 12039 NW CROOKED RD KANSAS CITY NO 64152-1469

-

NONE

POLICY DATE INFORMATION - Your policy is dated October 6, 1999. This notice provides information from October 6, 2007, to October 6, 2008.

PAYMENT INFORMATION - No amount is due. Your monthly payments of \$150.00 are made on the State Farm Payment Plan. Any payment received after October 4, 2008, is not reflected on this notice.

Continued planned payments of \$150.00 each month will provide coverage until October 5, 2011, based on guarantsed rates; and until August 5, 2014, based on current rates.

If no further payments are made, your policy will provide coverage until July 5, 2010, based on guaranteed rates; and until April 7, 2011, based on current rates.

INSURANCE INFORMATION

Insurance Amount

Universal Life

\$100,000.00

COST OF INSURANCE

Insurance Cost

Universal Life

\$1,917.91

ACCOUNT VALUE

Balance from 2007 Annual Notice
Payments
Interest Credited
Expense Charges
Cost of Insurance
Balance as of Oct. 2, 2008
Interest to Be Earned Oct. 6, 2008
I 9.80
I 9.80
I 9.80
I 9.80
I 9.80

5,516.32

5,536.12

INTEREST RATE - The account value currently earns 4.5% except the account value equal to any policy loan earns 6%. The interest rates are effective annual interest rates.

SURRENDER VALUE - The surrender value as of October 6, 2008, will be \$5,344.12. The total account value has been reduced by the surrender charge of \$192.00 to determine the surrender value.

Thanks for letting us serve you . . .

(Page 1 of 2)
All amounts shown are subject to verification.
See reverse side for important information.

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Propared OCT 4 2008
State Farm Life Insurance Co (Not Lipensed in MA, NY, or W/I/ State Farm Life and Accident Assurance Co (Licensed in NY and W/I)

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

PLEASE RETURN THIS PART WITH YOUR CHECK MADE PAYABLE TO STATE FARM

INSURED MICHAEL G VOGT

PLEASE PAY THIS AMOUNT

POLICY NUMBER LF-1722-5380

NONE

Your cancelled theck is your receipt. Any theck, draft, or money order is received subject to collection.

State Farm Insurance Companies 8900 Ambergien Blvd AUSTIN TK 78729-1110

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ANNUAL CONTACT

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Information continued for policy LF-1722-5380 Prepared October 4, 2008

 $\begin{array}{lll} \textbf{BENEFICIARY INFORMATION} & -\text{ The beneficiary designation is an important part of your policy.} & \textbf{Your beneficiary designation is:} \\ \end{array}$

Primary: BEVERLY VOGT Successor: Michael S vogt, Jennifer & Benefield, William Patrick Vogt

IMPORTANT POLICYOWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling state Parm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

ADDITIONAL INFORMATION — A new illustration for policy benefits and value will be provided upon request. There is currently no charge for this projection.

FINANCIAL TRANSACTIONS - Activity for Year Ending October 2, 2008

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Balance	from 2007 Annual	Notice			5,565.93
10062007		5.00	159.80	-	5.401.13
11022007	150.00	7.50	7	-	5.543.63
11062007	-	5.00	159.81	19.90	5,398,72
12032007	150.00	7.50	_	_	5,541.22
12062007	-	5.00	159.81	19.87	5,396.28
01022008	150.00	7.50	-	-	5.538.78
01062008		5.00	159.82	19.88	5.393.84
02042008	150.00	7.50	_	_	5,536.34 5,391.36
02062008		5.00	159.82	19.64	5,391.36
03032008		7.50	-	~	5,533.06
03062008		5.00	159.82	19.05	5,386.69
04022008		7.50	-	-	5,531,39
04052009		5.00	159.83	19.85	5,386.41
05022008	150.00	7.50	-	-	5,528.91
05062008		5.00	159.83	19.85	5,383.93
06022008		7.50	_	-	5,526.43
06062008		5.00	159.84	19.84	5,381.43
07022008		7.50	-		5,523.93
07062000		5.00	159.84	19.83	5,378.92
08042008		7.50	_ -	-	5,521.42
08063008		5.00	159.84	19.78	5.376.36
09022008		7.50	-		5,518.86
09062008		5.00	159.85	19.81	5,373.82
10022008	150.00	7.50	-	•	5,516.32

(Page 2 of 2)
When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

IF YOU HAVE MOVE	D, PLEASE CONTA	CT YOUR AGENT, IF	THIS IS NOT CONVEN	ENT, PLEASE COMPLETE THE FOLLOWING.
Street of Rural Route				Residence Phone Number
City	W	State/Province	ZIP/Postal Code Inside City Limits	Business Phone Humber Outside City Limits
Township	County			4
ls change: 🔲 Permane	an) 🔲 Temporary	if temporary, how many m	onthu? Da you	plan to return to your previous address? 🔲 Yes 🔲 N
mana esendta gnillaM 🗔	ge only 🔲 Local	ion change (Please see)	our State Farm Agent)	
(Auto Policyholders Only) Is the vehicle driven to an If the answer is "yes", wh	nd from work/school?			
		,,		203 203 4 00 01 0003 1/0400

State Farm Life insurance Co. 8900 Ambergien Blvd AUSTIN TX 78729-1110 Telephone (970)395-4094

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LIFE

POLICY NUMBER LF-1722-5380 E00C001 NICHAEL G YOGT 12039 NW CROOKED RD KANSAS CITY NO 64152~1469

Annual Notice of Policy Status

PLEASE PAY THIS AMOUNT

NONE

INSURED NICHAEL G VOGT

POLICY DATE INFORMATION - Your policy is dated October 6, 1999. This notice provides information from October 6, 2008, to October 6, 2009.

PAYMENT INFORMATION - No amount is due. Your monthly payments of \$150.00 are made on the State Parm Payment Plan. Any payment received after October 5, 2009, is not reflected on this notice.

Continued planned payments of \$150.00 each month will provide coverage until April 6, 2012, based on guaranteed rates; and until July 5, 2014, based on current rates.

If no further payments are made, your policy will provide coverage until April 7, 2011, based on guaranteed rates; and until January 5, 2012, based on current rates.

INSURANCE INFORMATION

Insurance Amount

Universal Life

\$100,000.00

COST OF INSURANCE

Insurance Cost

Universal Life

ACCOUNT VALUE	Increase	Decrease	Balance
Balance from 2008 Annual Notice Payments	1,800.00		5,536.12
Interest Credited	212.91		
Expense Charges Cost of Insurance		150.00 2,123.61	
Balance as of Oct. 2, 2009	18.91		5,275.42
interest to 8e Barned Oct. 6. 2009	18.91		

5.294.33 INTEREST RATE - The account value currently earns 4.5% except the account value equal to any policy loan earns 6%. The interest rates are effective annual interest rates.

SURRENDER VALUE - The surrender value as of October 6, 2009, will be \$5,294.33. The total account value has been reduced by the surrender charge of \$.00 to determine the surrender value.

Thanks for letting us serve you . . .

(Page 1 of 2) All amounts shown are subject to verification. See reverse side for important information.

Prepared OCT 5 2009
State Farm Life Insurance Co (Not Licensed in MA, NY, or Will/ State Farm Life and Accident Assurance Co (Licensed in NY and Will)

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT

PLEASE RETURN THIS PART WITH YOUR CHECK MADE PAYABLE TO STATE FARM

KICHAEL G VOGT

PLEASE PAY THIS AMOUNT

LF-1722-5380

Your cancelled check is your receipt. Any check, draft, or money order is received subject to collection.

State Farm Insurance Companies 8900 Ambergien Blvd AUSTIN TX 76729-1110

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ANNUAL CONTACT

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Information continued for policy LF-1722-5380 Prepared October 5, 2009

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Four beneficiary designation is:

Primary: BEVERLY VOGT SUCCESSOR: MICHAEL S VOGT, JENNIPER A BENEFIELD, WILLIAM PATRICK VOGT

Note: A change in marital status could necessitate a new beneficiary designation. Please contact your agent if your marital status has changed.

IMPORTANT POLICYONNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

ADDITIONAL INFORMATION — A new illustration for policy benefits and value will be provided upon request. There is currently no charge for this projection.

FINANCIAL TRANSACTIONS - Activity for Year Ending October 2, 2009

Date	Payments/ (Withdrawals)	Expense Charges	Cost of Insurance	Interest Credited	Ending Account Value
Bate 10022008 11022008 11022008 12022008 12022009 01022009 02022009 04022009 05042009 05062009 07022009	150.00 150.00 150.00 150.00 150.00 150.00 150.00 150.00 150.00			19.71 19.66 19.58 19.51 19.44 19.36 19.26	
08062009 09022009 09062009 10022009	150.00	5.00 7.50 5.00 7.50	177 <u>-</u> 14 177 <u>-</u> 18	19_05	5,153.61 5,296.11 5,132.92 5,275.42

(Page 2 of 2)
When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as zoon as the same day we receive your payment, and you will not receive your check back from your financial institution.

IF YOU HAVE MOVED, PLEASE CONTACT YOUR AGENT. IF THIS IS NOT CONVENIENT, PLEASE COMPLETE THE POLLOWING.									
Street or Rure Royle			_	Residence Phone Humber					
City	State/Province	ZP/Portal Code	_	Business Phone Number					
Township Co	unty	☐ Inside City Limits (Outside City Limits					
is change: Permanem To	mporary if temporary, how mi	any months? Do y	lou pl	vian to return to your previous address? 🔲 Yes					
Maliling address change only	Location change (Please	see your State Farm Agent)							
(Auto Policyholders Only) Is the vehicle driven to and from worl									
If the anewer is "yes", what is the eve	rage weekly mileage for such	use?		297-727.1 06-31 2007	0.0500				

State Farm Life Insurance Co. 8900 Ambergien Blvd AUSTIN TX 78729-1110 LIFE

	resphone (avolgas-	4084			
-	OLICY NUMBER F-1722-5380	Annual Notice	of Policy Status	PLEASE PAY THIS	AMOUNT ROME
	E022866 Michael G Vogt 12039 NW CROOKE Kanbas City Mo	D RD 64152-1469	INSURED MICHAEL G VO	OGT	_
	սկյվիկիրովօբիկի	ո լ ուգրիհիկը Էկիսկ			
	POLICY DATE INFORMA notice provides inf	TION - Your poli ormation from Oc	cy is dated Octobe tober 6, 2009, to	r 6, 1999. T October 6, 20	his 10.
	PAYMENT INFORMATION \$150.00 are made on received after Octo	- No amount is the State Farm ber 5, 2010, is	due. Your monthly Payment Plan. Any not reflected on t	payments of payment this notice.	
	Continued planned p coverage until Octo July 5, 2014, based	ayments of \$150. Der 5, 2012, bas on current rate	00 each month will ed on guaranteed r s.	provide ates; and unt	11
	If no further payme until January 5, 20 2012, based on curr	nts are made, yo 12, based on gua ent rates.	our policy will programmed rates; and	vide coverage until August	5,
	INSURANCE INFORMATI	ON	Insurance Amount		
	Universal Life		\$100,000.00		
	COST OF INSURANCE		Insurance Cost		
191938	Universal Life		\$2,355.44		
\$502	ACCOUNT VALUE Balance from 2009 A	neus Notice	Increase	Decrease	Ваlалсе 5.294.33
2	Payments		1,800.00		3,2,4.33
2	Expense Charges Cost of Insurance Balance as of Oct.		100.52	150.00	
až u	Balance as of Oct. Interest to Be Earn	4, 2010	15.10	2,255.44	4,775.41
× (3	Total	eq 001. 0, 2010	13.10		4,790.59
347 25 2 Annua	INTEREST RATE - The value equal to any June 5, 2010, the cto December 5, 2009 rates are effective	account value of policy loan earn urrent interest, the current in annual interest	currently earns 4% s 6%. From Decembrate was 4.25%. From the state was 4.25% are states.	except the acer 6, 2009 to rom October 6 5%. The inte	count , 2009 rest
	SURRENDER VALUE - \$4,790.59. The tot charge of \$.00 to 6	The surrender value at account value etermine the sur	lue as of October has been reduced render value.	6, 2010, will by the surren	be der
			All as	Page 1 (Page 1	•
		ng us serve you	Se	a reverse side for imp	
T	gent: KEN ROBINSON elephone: (816) 587 ate Farm Life Insurance Co (No. Li				5 2010 in NY and Will
	IF YOU HAVE MOVED, PL	EASE CONTACT YOUR A	GENT	PLEASE RETURN THIS I	
	INSURED KICHAEL	G VOGT		PLEASE PAY THIS	AMOUNT
	POLICY NUMBER L	F-1722-5380			NONE
You	if cancelled check is your receipt. Any cho	ck, draft, or money order is receiv	ed subject to collection.		
			State Farm I 8900 Ambergl AUSTIN TX 7	nsurance Comp. en Blvd 8729-1110	anies
			Մասիսիհանդիկի	hadladladlladd	1
	AUHNA	L CONTACT	:	IFE	1005

+++++LF172253802010100505E0228662594BC49

Information continued for policy LF-1722-5380 Prepared October 5, 2010

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: BEVERLY VOGT SUCCESSOF: NICHAEL S VOGT, JENNIFER A BENEFIELD, WILLIAM PATRICK VOGT

Bots: A change in marital status could necessitate a new beneficiary designation. Please contact your agent if your marital status has changed.

IMPORTANT POLICIONNER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by calling your agent at (816) 587-5466, or by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

ADDITIONAL INFORMATION - A new illustration for policy benefits and value will be provided upon request. There is currently no charge for this projection.

FINANCIAL TRANSACTIONS - Activity for Year Ending October 4, 2010

	Payments/	Expense	Cost of	Interest	Ending
Date	(Withdrawals)	Charges	Insurance	Credited	Account Value
Balance fr	om 2009 Annual	Notice			5,294.33
10-06-2009	-	5.00	195.82	-	5,093.51
11-02-2009	150.00	7.50	-	-	5,236.01
11-06-2009		5.00	195.90	18.77	5.053.08
12-02-2009		7.50		•	5,196.38
12-06-2009		5.00	195.98	18.62	5.014.02
01-04-2010		7.50	-55-5		5.156.52
01-06-2010		5.00	196.07	17.44	4,972.89
02-02-2010		7.50			5,115.39
02-06-2010		5.00	196.15	17.33	4,931.57
03-02-2010		7.50			5.074.07
03-06-2010		5.00	195.24	17.19	4,890.02
04-02-2010		7.50			5.032.52
04-06-2010		5.00	196.33	17.04	4,848.23
05-03-2010		7.50			4,990.73
05-06-2010		5.00	196.41	16.00	4,805.20
06-02-2010		7.50	20011		4,948.70
06-06-2010		5.00	196.50	16.75	4,763.95
07-02-2010		7.50	22220		4.906.45
07-06-2010		5.00	196.59	15.64	4,720.50
08-02-2010		7.50	X30:33		4.863.00
08-05-2010		5.00	196.68	15.50	4,675.82
09-02-2010		7.50	130.00		4,819.32
09-06-2010		5.00	196.77	15.36	4,632.91
10-04-2010		7.50	250111		4.775.41
10-04-2010	130.00	7.50	-	-	41113141

(Page 2 of 2)
When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment and you will not receive your check back from your financial institution.

D, PLE	ASE CONTA	CT YOUR AGE	NT, IF	THIS IS NOT CO	MVEN	MENT, PLEASE COMPLETE Y	HE FOLLO	WING.
				-		Residence Phone Humber		
	County	State/Province		ZiP/Postal Code Inside City Limite	_	Business Phone Number Outside City Limits		
	_	If temporary, how	-			plan to return to your previous addin	1407 🔲 Yes	ı 🗆 N
	Local	ion change (Piea	10 see y	pur State Farm Ap	ent)			
		Yes				_		
		- Times and the second					207,727 (207,727 (08,41,2007

State Farm Life Insurance Co. 8900 Ambergien Blvd AUSTIN TX 78729-1110 Telephone (970)395-4094 LIFE

POLICY NUMBER			PLEASE PAY 1	HIS AMOUNT
LF-1722-5380	Annual Notice of	Policy Status		NONE
E022738 MICHAEL G VOGT 12039 NW CROOKE KANGAS CITY MO	CD RD 54152-1469	INSURED MICHAEL G	VOGT	
մեզին-իինիկիիիիի <u>ինսիի</u>	Ամիվընկորհարդիկի			
POLICY DATE INFORMA notice provides inf	TION - Your policy	y is dated Octol ober 6, 2010, to	per 6, 1999.	This
PAYMENT INFORMATION \$150.00 are made on received after Octo				
Continued planned p coverage until Apri July 5, 2014, based				
If no further payme until October 5, 20 2013, based on curr	nts are made, your 12, based on guars ent rates.	r policy will pr inteed rates; as	rovide covera nd until Marc	9e n 7,
INSURANCE INFORMATI	ON	Insurance Amous	1t	
Universal Life		\$100,000.00		
COST OF INSURANCE		Insurance Cost		
g Universal Life		\$2,640.54		
ACCOUNT VALUE Balance from 2010 A Payments	nnual Notice	Increase 1,800.00	Decrease	Balance 4,790.59
Interest Credited		152.60	150.00	
, coar or thantaine	3, 2011		2,640.54	3,952.65
- TOCAT	ed Oct. 6, 2011	12.50		3,955.15
INTEREST RATE - The value equal to any effective annual in	account value cur policy loan earns terest rates.	rrently earns 49 6%. The inter	except the	account
SURRENDER VALUE - \$3,965.15. The tot charge of \$.00 to d	The surrender valual account value is etermine the surre	ie as of October has been reduced ander value.	6, 2011, wi by the surr	ll be ender
Thanks for letti	ng us serve you . , .	All	amounts shown are a	1 of 2) subject to verification. important information.
State Farm Life Insurance Co (Not Li	censed in MA, NY, or Wil/ Su	ite Farm Life and Acciden		CT 5 2011 sed in NY and Will
IF YOU HAVE MOVED, PI	LEASE CONTACT YOUR AGE	NT		IIS PART WITH YOUR BLE TO STATE FARM
INSURED MICHAEL	G VOGT		PLEASE PAY T	
POLICY NUMBER	F-1722-5380			NONE
Your cancelled check is your receipt. Any che	ck, draft, or money order is received :	Eubject to collection.		
		State Farm	Insurance Co	mpanies

BPDO Ambergien Bive Companies AUSTIN TX 78729-1110 Inggillelegillelegillikelikelikelikelike

ANNUAL CONTACT

LIFE

1005

+++++UF172253802011100505E02273825611849

Information continued for policy LF-1722-5380 Prepared October 5, 2011

BENEFICIARY INFORMATION - The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: BEVERLY VOGT Successor: MICHAEL S VOGT, JENNIFER A BENEFIELD, WILLIAM PATRICK VOGT

Note: A change in marital status could necessitate a new beneficiary designation. Please contact your agent if your marital status has changed.

IMPORTANT POLICYOMMER NOTICE - You should consider requesting more detailed information about your policy to understand how it may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current illustration. You may annually request, without charge, a current illustration by writing or calling State Farm Insurance at the address listed on this notice. If you do not receive a current illustration of your policy within 30 days from your request, you should contact your state insurance department.

ADDITIONAL INFORMATION - A new illustration for policy benefits and value will be provided upon request. There is currently no charge for this projection.

FINANCIAL TRANSACTIONS - Activity for Year Ending October 3, 2011

	Payments/	Expense	Cost of	Interest	Ending
Date	(Withdrawale)	Charges	Insurance	Credited	Account Value
Balance fr		Notice			4,790.59
10-06-2010	-	5.00	219.18	-	4.565.41
11-02-2010	150.00	7.50	-	-	4,708.91
11-05-2010		5.00	219.34	14.99	4.499.56
12-02-2010	150.00	7.50	_	-	4.642.06
12-05-2010	-	5.00	219.49	14.78	4,432.35
01-04-2011		7.50	_	-	4,574.85
01-06-2011	_	5.00	219.65	14.53	4,364.73
02-02-2011	150.00	7.50	-	-	4,507.23
02-06-2011	_	5.00	219.80	14.33	4.295.75
03-02-2011	150.00	7.50	-		4.439.26
03-06-2011	-	5.00	219.96	14.12	4.228.42
04-04-2011	150.00	7.50	_	-	4,370.92
04-05-2011	-	5.00	220,12	13.85	4,159.66
05-02-2011	150.00	7.50		-	4,302.16
05-06-2011	-	5.00	220.28	13.66	4.090.54
06-02-2011	150.00	7.50			4,233.04
06-06-2011		5.00	220.44	13.44	4.021.04
07-05-2011	150.00	7.50	-	•	4.163.54
07-06-2011		5.00	220.50	13.16	3.951.10
08-02-2011	150.00	7.50	-	-	4,093.60
08-06-2011	-	5.00	220.76	12.98	3,880.82
09-02-2011	150.00	7.50	-	-	4,023.32
09-06-2011		5.00	220.92	12.75	3,810.15
10-03-2011	150.00	7.50		-	3,952.65
8					

{ PAGE 2 of 2 }
When you provide a check as payment, you authorize us either to use information from your check to make a bne-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment and you will not receive your check beek from your financial institution.

Vogt, Michael G. v. SFLIC

12-29-3010 (LDSD

132001.3 1

State Farm Life Insurance Company 8900 Ambergian Bivd AUSTIN TX 78729-1110 Phone: 970-395-4094

L002802 MICHAEL G VOGT 12039 NW CROOKED RD KANSAS CITY MO 64152-1469

ոլիլակիկիլիանանականականությանի արագրարիլիանու

Annual Notice

Policy Number: Plan: Insured: LF-1722-5380 Universal Life MICHAEL G VOGT

Agent Tim Dugan 6453 N Cosby Ave Kansas City, MO 64151-2378 Phone: 816-746-1300

Important Next Steps

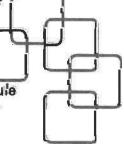
- Review this document closely to make sure this policy continues to meet your needs.
- WiPORTANT NOTICE: Your policy is projected to hope within the next 10 years, based on current rates, and assuming your current planned premiums are paid. Please review the End of Coverage Projection portion of this notice and then contact your State Farm agent to determine if changes are needed.
- Universal Life policies are flexible and change from year to year based on interest rates, payments, and other factors. Contact your State Farm agent to review your policy and options available to you.

Thanks for letting us serve yout



As life changes, so do your insurance needs.

Contact your agent to schedule your State Farm Insurance and Financial Review®.



Policy # LF-1722-5380

Page 1 of 5

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Policy Information

Policy Number LF-1722-5380

Policy Date October 06, 1999 Payment Information \$150.00 via the State Ferm Payment Plan.

insured MICHAEL & VOGT Plan Universal Life Any payment received after October 5, 2012, is not reflected on

this notice.



This notice reflects activity from October 6, 2011, to October 6, 2012.

Beneficiary Information

The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: BEVERLY VOGT

Successor: MICHAEL S VOGT, JENNIFER A BENEFIELD, WILLIAM PATRICK VOGT

Note: A change in marital status could necessitate a new beneficiary designation. Please contact your agent if your marital status has

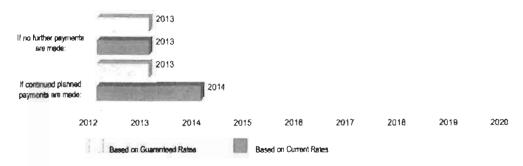
nsurance information

Insurance Amount benuani Universal Life \$100,000.00 Cost of Insurance Universal Life \$2,953.10

Policy # LF-1722-5380 Page 2 of 5



End of Coverage Projection



If no further payments are made, your policy will provide coverage until June 5, 2013, when the insured's age is 67, based on guaranteed rates, and until September 4, 2013, when the insured's age is 67, based on current rates.

If continued planned payments of \$150.00 each month are made, your policy will provide coverage until October 5, 2013, when the insured's age is 67, based on guaranteed rates, and until July 5, 2014, when the insured's age is 68, based on current rates.

A payment of at least \$1,492.44 will provide coverage until October 6, 2013, based on guaranteed rates.

The ege(s) shown above are based on the insured's age as of the policy anniversary preceding the projected coverage end date.

IMPORTANT NOTICE: Your policy is projected to lapse within the next 10 years, based on current rates, and assuming your current planned premiums are paid. While this is not necessarily a cause for concern, it is important to review the level at which your policy is being funded. Contact your State Farm agent today. Your egent will easist you in determining whether additional premium payments are necessary to ensure your policy continues to provide the coverage and protection you need.

Account Value

Total Account Value as of October 8, 2012	\$2,787.48
Cost of Insurance	-2,953.10
Expense Charges	- 150.00
Decreases	
Interest to be Earned October 6, 2012	8.68
Interest Credited	116.75
Payments	1,800.00
Increases	1000
Salance from 2011 Annual Notice	\$3,965.15

Interest Rate - The account value currently earns 4% except the account value equal to any policy loan earns 6%. The interest rates are effective annual interest rates.

Surrender Value as of October 6, 2012, will be \$2,787.48. The total account value has been reduced by the surrender charge of \$0.00 to determine the surrender value.

Note: If you request to surrender your policy, it cannot be peretated.

Transaction details are provided in the Account Value Transactions portion of this notice.

Policy # LF-1722-5380

Page 3 of 5



Account Value Transactions

	Date	Payments/ (Withdrawals)	Interest Credited	Expense Charges	Cost of Insurance	Ending Account Value
	Balance from 2	011 Annual Notice				\$3,965.15
	10-08-2011			5.00	244.73	3,715,42
	11-02-2011	150.00	-	7.50		3,857.92
	11-06-2011		12.21	5.00	244.97	3,620.16
	12-02-2011	150.00		7.50		3,762.66
0	12-08-2011	Approx. Libra	11.90	5.00	245.22	3,524.34
¥8	01-04-2012	150.00		7.50	4	3,666.84
ST-002995 0203-C00000	01-06-2012	ATT TO THE REAL PROPERTY.	11.55	5.00	245.48	3,427.93
28	02-02-2012	150.00		7.50		3,570.43
	02-08-2012	107 1 = 197	11.27	5.00	245.71	3,330.99
	03-02-2012	150.00	W	7.50		3,473.49
	03-06-2012		10.95	5.00	245.98	3,233.48
	04-02-2012	150.00		7.50		3,375.98
	04-06-2012	• 70	10.63	5.00	246.21	3,135.40
	05-02-2012	150.00	•	7.50		3,277.90
	05-08-2012		10.31	5.00	248.46	3,036.75
	06-04-2012	150.00		7.50		3,179.25
	06-06-2012		9.96	5.00	248.71	2,937.50
	07-02-2012	150.00		7.50	•	3,080.00
	07-08-2012	CONTRACTOR OF THE PARTY	9.66	5.00	248.97	2,837.69
	08-02-2012	150.00	•	7.50	1981	2,980.19
	08-06-2012		9.33	5.00	247.22	2,737.30
	09-04-2012	150.00	4	7.50	140	2,879.80
	09-06-2012	MINERAL MARK	8.98	5.00	247.48	2,638.30
	10-02-2012	150.00	-	7.50	•	2,778.80
	Totals	\$1,800.00	\$116.75	\$150,00	\$2,953.10	\$2,778.80*

^{*} Does not reflect interest to be earned October 06, 2012.

Information and Services

- If you have moved, please contact your State Farm Agent or visit statefarm.com® to change your address.
- All amounts shown are subject to verification.
- When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.
- Under the tax law, certain events during the life of a life insurance policy may be taxable to the policyowner. The following may result in taxable income: partial withdrawals, policy surrenders, lapses, assignments, as well as loans from policies that are MECs (Modified Endowment Contracts). If an event is taxable, generally the amount the policyowner is taxed on is the 'gain' in the policy. The gain usually is the policy's account value less the premiums paid. Once a taxable gain is reported, it cannot be changed. Please contact your tax advisor for additional
- A new iffustration for policy benefits and value will be provided upon request. There is currently no charge for this projection.

Continued on next page

Policy # LF-1722-5380

Page 4 of 5

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Information and Services (Continued)

IMPORTANT POLICY OWNER NOTICE - You should consider requesting more detailed information about your policy to understand how it
may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current
litustration. You may annually request, without charge, a current illustration by calling your agent at 816-746-1300, by calling State Farm
Insurance at 970-395-4094, or by writing to the address listed on this notice. If you do not receive a current illustration of your policy within 30
days from your request, you should contact your state insurance department.

State Farm Life Insurance Company (Not Licensed in MA, NY, or WI)
State Farm Life and Accident Assurance Company (Licensed in NY and WI)
Bloomington, IL.

Policy # LF-1722-5380

Page 5 of 5

Prepared October 5, 2012

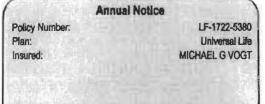
Vogt, Michael G. v. SFLIC

VOGTM00000069PROD

8900 Ambergien Blvd AUSTIN TX 78729-1110 Phone: 970-395-4094

L005630 MICHAEL G VOGT 12039 NW CROCKED RD KANSAS CITY MO 64152-1489

- Միլի Միֆինիսի Միրգորի է իրականից չականի անկանի անկանի արև իրանական հայարական հայարական հայարական հայարական հ



Agent Tim Dugan 6453 N Cosby Ave Kansas City, MO 64151-2378 Phone: 816-746-1300

Important Next Steps

- Review this document closely to make sure this policy continues to mest your needs.
- IMPORTANT NOTICE: Your policy is projected to lapse within the next 10 years, based on current rates, and assuming your current planned. premiums are paid. Please review the End of Coverage Projection portion of this notice and then contact your State Farm agent to determine if changes are needed.
- · Universal Life policies are flexible and change from year to year based on interest rates, payments, and other factors. Contact your State Farm agent to review your policy and options available to you.

Thanks for letting us serve you!



Check in with your State Farm® agent today!

"Discount names, percentages, and aveilability may very by state

State Farm Mutual Automobile Insurance Company, State Farm Indernalty Company, Bloomington, It.

TPG2

Policy # LF-1722-5380

Page 1 of 4

Prepared October 5, 2013

2 302 0141-2013 1636 82740D



Policy Information

Policy Number LF-1722-5380

Policy Date October 06, 1999

Plan

Payment Information

\$150,00 via the State Farm Payment Plan.

Insured MICHAEL G VOGT

Universal Life

Any payment received after October 5, 2013, is not reflected on

this notice.



This notice reflects activity from October 6, 2012, to October 6, 2013.

Beneficlary Information

The beneficiary designation is an important part of your policy. Your beneficiary designation is:

Primary: BEVERLY VOGT

Successor: MICHAEL S VOGT, JENNIFER A BENEFIELD, WILLIAM PATRICK VOGT

Note: A change in marital status could necessitate a new beneficiary designation. Please contact your agent if your marital status has

Insurance Information

Insurance Amount	Insured	
Universal Life	\$100,000.00	
Cost of insurance		
Universal Life	\$3,317.98	

End of Coverage Projection

If no further payments are made, your policy will provide coverage until February 4, 2014, when the insured's age is 68, based on guaranteed rates, and until March 7, 2014, when the insured's age is 68, based on current rates.

If continued planned payments of \$150.00 each month are made, your policy will provide coverage until March 7, 2014, when the insured's age is 68, based on guaranteed rates, and until July 5, 2014, when the insured's age is 68, based on current rates.

A payment of at least \$3,614.97 will provide coverage until October 6, 2014, based on guaranteed rates.

The age(s) shown above are based on the insured's age as of the policy anniversary preceding the projected coverage end date.

IMPORTANT NOTICE: Your policy is projected to lapse within the next 10 years, based on current rates, and assuming your current planned premiums are paid. While this is not necessarily a cause for concern, it is important to review the level at which your policy is being funded. Contact your State Farm agent today. Your agent will assist you in determining whether additional premium payments are necessary to ensure your policy continues to provide the coverage and protection you need.

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Account Value

Balance from 2012 Annual Notice	\$2,787,48
Increases	
Payments	1,800.00
Interest Credited	67.03
Interest to be Earned October 6, 2013	3.45
Decreases	
Expense Charges	- 150.00
Cost of Insurance	- 3,317.98
Total Account Value as of October 6, 2013	\$1,189.98

Interest Rate — The account value currently earns 4% except the account value equal to any policy loan earns 6%. The interest rates are effective annual interest rates.

Surrender Value as of October 6, 2013, will be \$1,189.98. The total account value has been reduced by the surrender charge of \$0.00 to determine the surrender value. Note: If you request to surrender your policy, it cannot be

reinstated.

Transaction details are provided in the Account Value Transactions portion of this notice.

Account Value Transactions

Date	Paymenta/ (Withdrawais)	Interest Credited	Expense Charges	Cost of Insurance	Ending Account Value
Balance from 2	612 Annual Notice				\$2,787.48
10-06-2012		Distriction Logic	5.00	274.45	2,508.03
11-02-2012	150.00	•3	7.50		2,650.53
11-06-2012	BOOK TO EAR ALL	8.26	5.00	274.82	2,378.97
12-03-2012	160.00	•	7.50		2,521.47
12-06-2012		7.82	5.00	275.18	2,249.11
01-03-2013	150.00	*	7.50	4	2,391.61
01-06-2013		739	5.00	275.55	2,118.45
02-04-2013	150.00	J.	7.50		2,260.95
02-06-2013		6.95	5.00	275.93	1,988.97
03-04-2013	150.00	-	7.50	9	2,129.47
03-06-2013		6.52	5.00	276.30	1,854.69
04-02-2013	160.00	•	7.50		1,997.19
04-05-2013		6.12	5.00	276.67	1,721.64
05-02-2013	150.00	100	7.50	·	1,864.14
05-06-2013		5.68	5.00	277.05	1,587,77
06-03-2013	150.00	•	7.50		1,730.27
06-06-2013		523	5.00	277.43	1,453.07
07-02-2013	150.00		7.50		1,595.57
07-06-2013		4.80	5.00	277.81	1,317,56
08-02-2013	150.00	20	7.50		1,460.06
08-06-2013		4.36	5.00	278.20	1,181.22
09-03-2013	150,00		7.50	•	1,323.72
09-08-2013	TW- Williams	3.90	5.00	278.59	1,044.03
10-03-2013	150.00	-	7.50	•	1,186.53
Totale	\$1,600.00	\$67.03	\$150.00	\$3,317.98	\$1,188.53*

^{*} Dose not reflect interest to be earned October 06, 2013.

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Information and Services

- If you have moved, please contact your State Farm Agent or visit statefarm.com® to change your address.
- All amounts shown are subject to verification.
- When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer
 from your account or to process the payment as a check transaction. When we use information on your check to make an electronic fund
 transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check
 back from your financial institution.



- Under the tax law, certain events during the life of a life insurance policy may be taxable to the policyowner. The following may result in taxable income; partial withdrawals, policy surrenders, lapses, assignments, as well as loans from policies that are MECs (Modified Endowment Contracts). If an event is taxable, generally the amount the policyowner is taxed on is the "gain" in the policy. The gain usually is the policy's account value less the premiums paid. Once a taxable gain is reported, it cannot be changed. Please contact your tax advisor for additional information.
- A new illustration for policy benefits and value will be provided upon request. There is currently no charge for this projection.
- IMPORTANT POLICY OWNER NOTICE You should consider requesting more detailed information about your policy to understand how it
 may perform in the future. You should not consider replacement of your policy or make changes in your coverage without requesting a current
 illustration. You may annually request, without charge, a current illustration by calling your agent at 816-746-1300, by calling State Farm
 insurance at 970-395-4094, or by writing to the address listed on this notice. If you do not receive a current illustration of your policy within 30
 days from your request, you should contact your state insurance department.

State Farm Life Insurance Company (Not Licensed In MA, NY, or WI)

State Farm Life and Accident Assurance Company (Licensed in NY and WI)

Bloomington, IL

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Prepared October 5, 2013

Vogt, Michael G. v. SFLIC

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